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An Essay on  
Vicaries of the Spirit

Accompanied by a Case: Paper March  
6. 1829

Submitted to the Medical faculty  
of the University of Pennsylvania  
for the degree of  
Doctor of Medicine  
By Miller Luther  
of Pennsylvania  
Philadelphia Dec. 25, 1828.

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Caries of the Spine.

This disease is generally met with among infants or young children, though adults are by no means exempt from it. Percival Pott, who perhaps was more extensively acquainted with it than any one since the time in which he wrote, says, he "never saw it at an age beyond forty". The case of my father, about which more will be said hereafter, so far as my information extends, is a solitary instance of its occurrence at an age beyond that designated by Mr. Pott. It is generally dependent upon a serofulous taint of the system: but the same case mentioned above, besides being singular with regard to the period of life at which he became affected with it, is perhaps not less so in this respect,

General Principles

The first principle of the science of the mind is that the mind is a faculty of the soul, and is not a substance. The second principle is that the mind is a faculty of the soul, and is not a substance. The third principle is that the mind is a faculty of the soul, and is not a substance. The fourth principle is that the mind is a faculty of the soul, and is not a substance. The fifth principle is that the mind is a faculty of the soul, and is not a substance. The sixth principle is that the mind is a faculty of the soul, and is not a substance. The seventh principle is that the mind is a faculty of the soul, and is not a substance. The eighth principle is that the mind is a faculty of the soul, and is not a substance. The ninth principle is that the mind is a faculty of the soul, and is not a substance. The tenth principle is that the mind is a faculty of the soul, and is not a substance.

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for he was naturally of a strong and robust constitution, having enjoyed uninterrupted good health until within the last five or six years; when the vigour of his constitution became impaired from severe and protracted visceral disease. Still however, it may be said to be confined to those, whose constitutions are enfeebled or broken down by previous disease; and the present instance, instead of militating against this conclusion, tends rather to confirm it, for, at the onset of the disease, he was manifestly in a feeble and debilitated state of health; and, although no well developed signs of a serofulous diathesis could be said to exist in his system, it must not be denied, that this habit, strongly marked, exists in one of his offspring.

"Contusions and shocks from falls, sprains of the vertebral joints, rachitis, rheumatism, caries and habitual malpositions of the body, particularly during its growth, malformation, or irregular and unnatural growth of bone, and muscular debility" may be enu-

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merated among the remote causes.

The symptoms of which the patient will complain when first attacked with it are, dull, obscure, deep-seated pains, generally in the dorsal vertebrae; though they are often met with in the cervical & lumbar. This pain, as it is described by authors, is not very severe; but in the case to which I have already alluded, it was constant, and often times so extremely tormenting; that, frequently, whilst partaking of a meal, he would be obliged to leave the table with his meal unfinished, and resort to the recumbent posture in order to relieve himself. It was compared by him to the gnawing of a dog; and was always increased by exercise on horseback, or in a gig. There will be felt, at the same time, a coldness and a numbness, or an uneasy tingling sensation, in the lower extremities. The patient will complain of a tightness across the pso-biculus cordis, which is often compared to a band drawn

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firmly around the body. This symptom is owing to a commencing paralysis of the abdominal muscles. It is sometimes described as an oppression of breathing, tightness of the stomach, band tied round the belly, torpor of the abdomen, and by other expressions in different patients. The patient is much harassed with flatulency, the abdomen is much distended, and the respiration is affected. He will be particularly careful to create as little motion between the vertebral joints as possible: thus in stooping, he will be observed to separate his legs to some distance, and to reach down without subjecting the spine to much change in its position. To relieve himself of the superincumbent weight, which must of course increase the degree of pain felt in the diseased parts, he will be found, whilst sitting, to recline on his hands, with his elbows resting on his thighs. When he walks the upper part of the spine inclines forwards, he is unable to direct his

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steps with precision; his gait is slow, hesitating, and tottering; he is soon fatigued, he stumbles, trips, crosses his legs, and, if not guarded, falls. While seated, his legs will be almost always found across each other and drawn up under the seat. The limbs are frequently moved by involuntary twitchings, which are occasionally troublesome during the night. The animal sensibility, temperature, and size of the lower extremities still continue to diminish, and the voluntary powers which the patient exercises over them, grow less and less, until they are completely paralysed. The patient is now incapable of leaving the bed; there is great want of action in the genital organs, and the power either of retaining, or discharging the feces and urine, is lost so that they come away involuntarily.

Diagnosis. There are few diseases that are more obscure, or more frequently mistaken than this, in its earliest stage. 1<sup>st</sup> Because little pain is felt at the time

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nal of the disorder: 2<sup>d</sup> no inequality or deviation is manifest to the eye or touch; 3<sup>d</sup> the irritation is often in the parietes or contents of the abdomen, in a transverse direction with the disease in the spine, producing dysphasia, pyrosis, vomiting, lightings across the praecordia, &c. These, and other affections, consequent upon the primary disease in the spine, are not only painful, but so embarrassing as entirely to engross the attention of both patient & physician. Hence the sufferer has been harassed by a long, continued course of severe treatment, without gaining any permanent advantage; whereas, had remedial measures been directed to the immediate source of the mischief, a cure would, most probably, have been obtained.

When, therefore, the patient complains of a sense of lightness across the praecordium cordis, if his respiration is affected, if he is languid, and soon tired upon taking exercise; when pain is felt in the spinal

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column, and the limbs feel cold and numb, we should apprehend some serious disease, and immediately, inspect the spine.

To distinguish the curvature resulting from caries, from that arising from mere relaxation of the muscles and ligaments of the spine I shall transcribe without further apology, the following excellent remarks by Dr. Allen:

That kind of curvature, which results from caries, or disease, is almost marked by a sudden or abrupt distortion and the trunk is almost always thrown directly, ~~forward~~ <sup>in consequence of the</sup> ~~in consequence of the~~ <sup>barrels of one</sup> or more of the vertebrae being destroyed by caries. Sometimes, however, as we ought but may easily, the caries begins in the transverse or articulating process in consequence of which the direction of the curvature is lateral. I have, as yet only seen one case of this latter kind of caries and then the suddenness of the distortion, taken in connection with the

\* See no further in Dr. Allen's observations on the nature, progress, and cure of the disease, in the spine.

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other symptoms, rendered its nature at once evident. Now all these kinds of distortion of the spine which do not proceed from caries, are characterized by a mere curvature at the most distorted part in which no angular or sudden deviation from the natural direction can be discovered. The distortion is, moreover, almost universally, from side to side, and as two or more curvatures can be distinctly detected in different parts of the whole column, that contorted appearance, to designate which the term Serpentine has been used by Mr. Shaw, is produced?

After some other remarks in connection with this subject, he goes on to say, that in "caries of the spine, there is always a tenderness, and often severe pain under the incitement both of motion and impure. During the life of the patient, heat, swelling, and redness, are sometimes present in the surrounding soft parts, and on a post-mortem examination all the signs of vascular engorgement are

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exhibited in the affected vertebra and the included membranes and nerves.

It is frequently formed, in consequence of the discharge from the various pus sacs, infiltrating into the cellular tissue, and as these are generally carried by gravitation to dependent and remote parts, so as to induce in spinal or sinuous swellings, their connection with the cavity is sometimes overlooked by practitioners. The most striking characteristic of this kind of disease, however, is, the peculiar analgetic affection of the lower extremities, which Mr. Pott rightly attributed to the vascular engorgement and inflammatory irritation of that portion of the spinal marrow contained within the affected vertebra: after some farther remarks illustrating of this subject, he thus concludes: "for the purpose of still further contra-distinguishing the simple distortions of the spine, from the disease characterized by the above circumstances, we need

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only observe, that they are not necessarily accom-  
panied by pain, nor even tenderness under pres-  
sure, nor does motion, or exercise of any kind, ever  
prove injurious, except when carried to excess. Ab-  
scesses do not form in connection with such curva-  
tures, nor does paralysis ever take place in the in-  
ferior extremities. The hectic irritation, which is  
always present in the last stage of caries, is also  
wanting in all cases of simple distortions.

The loss of voluntary power, in the lower extrem-  
ities, which is merely a symptom of the engorged  
state of the membranes of the spinal marrow, and  
the aneurism, of the n. v. s. s. likewise, renders this  
disease exceedingly liable to be mistaken for a true  
palsy; But the febrile irritation, which is usu-  
ally present in the incipient stage of caries, the  
violent lightening across the Hamula together with  
other symptoms, resulting from the deranged state  
of the thoracic and abdominal viscera, might, in

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general, be sufficient to distinguish the two diseases. But, in order to render their diagnosis still more unambiguous, the state of the extremities themselves should be referred to:— the particular state of which, in each disease, is such, that the difference will at once be evident to the most careful observer.

This difference, which was first so clearly delineated by Mr. Pott, is known, by the muscles in the limb, being soft, flabby and unresisting, while in cure, though before and after, in size, they are rigid and contracted, requiring considerable force either to relax or extend the limb.

The P. C. H. S. may be regarded as favourable, when there is no suppurative diathesis: when the patient is not too far advanced in years; and where the treatment is commenced in the early stages of the disease. If, in the course of the disease, the patient be assailed with inflammation

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of the pleura, dyspnoea, tubercula or vomica, which sometimes happens from the compression and alteration of figure, which the lungs may suffer, in consequence of the change in the form of the chest, the prognosis is unfavourable.

When the curies is combined with the appearance of an internal abscess communicating with the diseased vertebrae, the termination must be looked upon as unfavourable, whether the abscess have the name of lumbar, psoas or any other appellation or situation. In such cases the general health and appetite fail, the digestive functions become impaired, and deranged, the patient becomes gradually emaciated, he is affected with hectic fever, and is generally carried off by diarrhoea.

When all spinal pain has ceased, and the digestive functions are improving, when, at the same time, the patient acquires flesh and spirits, re-

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comes the muscular power of the extremities is freed from dyspnoea, epigastric pain, and tightness, and from pain of the knees and sleeps well; he may, wholly, or in part, in a short time, recover.

Pathology. The diversity of opinion, which prevails as to the general principles which should govern us in the treatment of this complaint, is in a great measure to be attributed to the erroneous notions which are entertained of its proximate cause. It is, perhaps, not generally known, that those who are slightly conversant with spinal disease are exceedingly prone to look upon the paralytic state of the lower extremities, as a primary disorder, and any remedies which they may make use of will consequently be directed to them with a view to cure the disease, instead of to the spine, which is the real seat of the disorder.

We are enabled from the knowledge of this fact, to account for the unwarrantable attempts to cure

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this affection hitherto the time of Pott: the ancients having treated it as a common palsy.

The disease may be said to consist in a slow or serous, ulous inflammation of the organic parts of the fibro-cartilaginous and osseous tissues of the vertebral apparatus, eventually, running on to desorganization and erosion, or caries of the osseous substance: which, by the irritation thus created, implicates the contiguous parts, as the spinal marrow and meninges with their investing membranes. The intervertebral cartilages are first decomposed or dissolved; to this effect, a mortification or caries of the osseous substance, in corresponding points, soon succeeds: and develops itself, more or less rapidly, according to the intensity of the causes, the age, and idiosyncrasy of the individual: the caries rarely attacks the spinous or transverse processes.

The sinuous, proceeds, in consequence of the de-

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struction of the inter vertebral cartilages, and of the process of absorption and of decomposition, which is going on in the bone, separates them each other, and give rise to the propection, which is to be observed in the course of the disease. The diseased vessel emit a purulent fluid, which first accumulates under the membranes, or investing ligamentsous texture; afterwards it becomes extravasated through the cellular structure towards the most depending parts, or towards those where it meets with the least resistance, and accumulates at places more or less remote, where it produces what is called symptomatic abscess, or abscess by congestion.

From this state of the parts, we will easily be enabled to account for the symptomatic affections of the lower extremities, and of the deranged state of the thoracic and abdominal viscera. For such is the irritation, which is now created at

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the diseased points in the spine, that an increased flow of blood is invited into them, and their adjacent parts; the membranous coverings of the spinal marrow, and the neurilemma of the nerves, become engorged, and consequently thickened by the volume of blood now pressed into them, the spinal cord and nerves are encircled upon by their respective envelopes, which, in consequence of their increased bulk, so compressed or as it were, choke the cord and nerves, that the flow of nervous power to remote and dependant parts becomes in a great measure interrupted. thus giving rise to paralysis of the lower extremities, as well as to other parts of the body, and to the derangement of the digestive and respiratory organs. From these premises, it will be observed, that we maintain the paralytic state of the lower limbs, to be independent of the malformation of the spine. If this useless state of the limbs was dependant, as

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is sometimes said, upon the deformity of the spine, the degree and extent of the curve would most probably produce a corresponding variation in the symptoms: whereas Mr Pott says he does not remember ever to have seen this useless state of the limbs, from a mere malformation of the spine, however crooked such malformation may have been; but that the smallest is, when perfectly formed, attended with the same consequences as the largest. Although it is certain that a dislocation of any of the vertebrae, would be attended with symptoms of a paralytic kind, yet they would be very unlike to those which involve the limbs in the present case?

What however we must consider conclusive on this subject, is, that we are often enabled to restore the functions of the limbs, without relieving the curvature of the vertebrae.

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a diminished power over the muscles of the lower extremities together with other symptoms denoting, a diminution of the nervous power, are often present too, before any curvature takes place, so that a morbid state of the spine, and of the psoas & iliac muscles, is the primary & original cause. The fibrous tissues, from the deficient organic sensibility with which they are naturally endowed are extremely tardy, in taking on the inflammatory action; but when once this state is induced in them, it is of a very intractable nature and the consequences sometimes very serious. The practitioner should therefore, bear in mind that these characteristic properties of the fibrous tissues emphatically belong to the inflammation which commences in the inter-vertebral substances; and, in order that he may, the more easily, dispose it to take a prosperous course, he must apply his remedies in its incipient stage, when

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it may be regarded as a simple inflammation. If a cure is not attempted before this stage has passed over, or until disorganization and caries, or erosion of the osseous substance, has obtained, it will certainly be commenced under very discouraging circumstances.

*Treatment.* Mr Pott not only gave the full accurate description of this disease, but also indicated the proper mode of treating it. To him are we indebted for the knowledge of the efficacy of caustic issues. He proved, and the experience of all succeeding surgeons has proved, that a copious suppuration kept up for a long time in the subcutaneous cellular tissue, which surrounds the projecting part of the spine, is the surest and best remedy. It will always be found successful, if employed before pus is formed, and it will always be found, that the patients die if it is neglected.

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I have already observed, that the symptoms which indicate its early stage are exceedingly vague and undefined, so that it often makes alarming progress before its existence is suspected. As it is of the greatest importance to discover it as early as possible, we should carefully examine every one, who complains of a sensation of prickling in the thighs, weakness of the lower extremities, an uneasy sensation across the stomach, and a constriction of the chest, which renders breathing difficult. The hair in the back is generally moderate, and not such as would lead you to suspect the existence of any very important disease. When these symptoms are present, we should carefully examine the spine by running the fingers over the spinous process, and pressing firmly upon each; in this way, we may be enabled to discover the precise seat of the disorder, in as much as the patient will

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complaint when, rupture is made upon the affected vertebrae."

— called upon by a patient labouring under some severe disease should in medicine, place him in the recumbent posture. The salutary effect of rest and position in all acute inflammatory complaints is well known, but it is far remarkable in this. Here the irritation about the diseased parts is not only increased by the so called incumbent weight, but also by the motion exercised by the irritated surfaces upon each other, and hence the utility of the recumbent posture, in taking off the weight sustained by these parts, and also of preventing motion which is so injurious in this particular case. To reduce vascular excitement, and engorgement of the vessels of the affected parts, venesection, and leeching or cupping, with scarification on each side of the spinal column, should be resorted to, and re-

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The caustic ~~lines~~ should immediately be established on each side of the excoriation: & these, to be efficient should be from two to four inches in length.

The part intended to be converted into an if-  
sue, should be accurately marked out by ink; or what may answer better by cutting in a piece of linen spread with adhesive plaster, an orifice corresponding with the shape and size of the issue which is intended to be established: this may not only serve as a guide for the application of the caustic, but also to protect the parts immediately around from its action. That portion of the integuments, thus included, should then be rubbed with the vegetable caustic until it has turned of a dull brown colour: a poultice should then be applied to the eschar in order to expedite their separation. As soon as the eschar

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are separated, or from a slight adhesion they ad-  
mit of being separated, we must confine some  
foreign substance in the issues for the purpose of  
keeping them open. & nothing will be found to  
answer this purpose so well as the orange peels.

They seem to possess a slightly stimulating prop-  
erty, for an increased discharge always follows  
the use of fresh leaves which is not the case when  
they have been used, or when they are encrust-  
ed with hus. A row of heads, connected together  
with threads, should be laid in the soil and con-  
fined by adhesive strips. It is the in-  
clination of nature, that the issues often rapidly  
close, and hence it becomes necessary, that a frequent  
renewal of the caustic should be made, in order that  
there may be a free discharging. This frequent re-  
newal of the caustic, is sometimes attended with the  
very best effects, increased warmth and sensibili-  
ty in the parts, and a better control over the mass

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cles of the lower extremities I have frequently observed  
to follow its use.

The unanimity, however, with which the reg-  
etable caustic was for a time resorted to, in the cure  
of this complaint, has been somewhat broken by the  
flattering account which Baron Larrey gave  
of his heroic remedy, the moxa. He says the cau-  
teries recommended by Pott in rachitis do not  
possess the advantage that he derived from the moxa.  
That the colic and suppuration which this sort of  
cauteries occasions, weakens the patient very con-  
siderable, without producing the desired resolution  
especially, if there be symptomatic abscesses. If these  
abscesses are opened early, before efficacious means  
have been employed against the cure, whatever  
may be the process, the patient dies very soon. And  
in the administration of these means, it is necessary  
to endeavour to stop the process of suppuration;  
it is sufficient to produce an excitement on the

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parts affected, to divert the morbid principles, and to change the vital properties of the inflamed parts. Moxa succeeded by cupping with description large is the double indication. A great number of patients whose situations were considered desperate, have owed their safety to this remedy.

\* The confidence with which this remedy is thus recommended, by one of our highest medical authorities, certainly, entitles it to the greatest confidence and respect. It most unquestionably is capable of doing much good in this complaint when properly and judiciously resorted to: but like most other new remedies, that are ushered into practice, it is prescribed without due regard being paid to the state or condition of the system. If applied when the pulse is excited, skin hot, and cheeks flushed, which is usually the case in the commencement, the mischief which

\* See Larrey's Surgical Essays, page 57.

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will result from the constant excitement they keep up in the system, will, in general, overbalance any good which may be derived from them. When, however, this stage of excitement has passed over, and atony and relaxation have supervened, the effects, which they produce, are highly beneficial.

In addition to this the purgative system, which was first introduced into the treatment of this disease by our justly distinguished countryman Dr Sydenham, should be rigidly, insisted on, and those who have had to contend with this disease, can duly appreciate the value of this practice. Castor oil and Scammony tartar is preferred by him, and it produces its beneficial effects by bringing away the secretions of the intestines, thereby acting as a drain from the part. It should be given every other day, but it is apt by long continuance to disordered the stomach and bowels, so that it may become necessary to substitute some other in its stead.

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Iron and Magnesia, with a little ginger, will answer this purpose exceedingly well.

Besides this, it is important that especial care should be paid to the general health. The vascular system must be kept in a calm and subdued state; the diet should be restricted and of easy digestion, and the compound decoction of Sarsaparilla, or the Symplic. Cuisinier, with a grain of corrosive sublimate added to each bottle (from its acknowledged utility, in removing or purifying diseases) may likewise be given with advantage. A salivation, however, should be guarded against, as the excitement, which will be kept up by the specific action of mercury, will in all cases do harm.

When the weather is favourable, and the general health does not forbid it, exercise in the open air, in a recumbent posture, should be made use of.

It must be evident from the nature of the privation which those suffer who labour under this



disease, that they are almost entirely dependant upon the mercy and compassion of relatives or friends.

In an adult, (to which state our remarks though out this essay, have been more particularly applied) two, or three persons will always be required, whenever it may be necessary to move or turn the patient; hence, considering the frequent droppings which are occasioned by the excretories; the pain which the patient must necessarily suffer from lying on the back; how oft it may be necessary to move or shift the patient, to attend to the calls of nature, and how frequently the discharges from the want of control over the sphincters, may be passed involuntarily into the bed, taking, we say, all this into consideration, it will at once be evident, that the necessity to move, or shift the patient will be frequent, and that the task of effecting these changes in the position of the

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patient, will, consequently, be very tedious and  
expensive on those, whose lot it is to perform them,  
and very mortifying and humiliating to him,  
who is their subject.

Our remarks naturally lead us to the consid-  
eration of another, and, what we consider, a  
very important part in the treatment of this  
disorder, viz. the use of machines. It is not  
uncommonly the necessity of raising the  
patient out of bed, every time he may have an  
inclination to go to stool, but likewise to move or  
turn him into any desirable posture without pain  
or inconvenience, and with ease and facility to  
his attendants.

We are convinced that the cure of this com-  
plaint has been considerably retarded, and that  
much injury has oftentimes resulted to the patient  
from the want of some more convenient arrange-  
ments. Much labour and fatigue on the part

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of attendants and the exemption from many unpleasant duties are gained from their use.

The objects intended to be answered by these contrivances, are, that for the purpose of dipping the body he may be turned on either side and lifted from one part of the bed to another, and for elevation or making the bed, he may be raised out of it in any desirable posture and again returned.

In cases, where from disease it has been necessary for persons to be confined for a long time, authors have hitherto been in the habit of recommending "Sir James Earle's Bed", almost exclusively. Persons, however, who are thus confined, are apt, from lying on it any time, to become atracted it is extremely filthy, and in this, particular case, does not answer the purpose for which it is designed.

I was in the winter of 1827, at Dr. Gibsons Lecture on fractures of the Os Femoris (but we were find

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made acquainted with the use of Jents's Alleviator. In cases of fractures of this bone, so here, rest is so necessary, and motion so injurious, he described it as being extremely serviceable. It then struck me as being very applicable to my father's case, who was then labouring under a caries of the spine, & accordingly procured one and sent it home. The duties of attendants were not only much facilitated by it, but were also performed with appreciable and inconvenient to the patient. It is applicable to all cases of confinement, still, however, it is deficient in some respects; its machinery is too complicated; too much time is required in its use, & it is for use: which renders it particularly objectionable in the present case.

These are objections which cannot be urged against one of more recent invention. I allude to "Smith's improved Bedstead". For convenience and comfort this certainly exceeds any thing of the kind

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ever before offered to the public. This bedstead is so constructed that the head and body of the patient may be raised to any, or several heights, and kept so as long as desired, and the lower extremities may be elevated or depressed to form any angle with his body, so that the patient may be put into any posture required for ease and comfort, from being horizontally or flat, to sitting up as in a chair. From lying on his back, he may be turned on either side, and in fact from any part of the neck, and so on, and for the purpose of evacuation, or making the bed, he may be raised out of it in any desirable position, and again returned. Thus and many other conveniences may be effected by a single person (or the patient may assist if he have the use of his arms), with much more certainty & ease than can possibly be done with hands.

That the attention of authors, who have so ably written on this disease, has not been more particularly

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clearly directed to this subject is really a matter of astonishment. It is certainly, of immense importance, and worthy the particular attention of every one, who writes on this formidable disease. For of what avail is it, that we confine our patient to the recumbent position for months, without suffering him to get up at all, if, for the purpose of evacuation, we make, and then drag him out of bed, hastily, we say, for this must always be the case from the hurry and confusion which is created on such occasions.

There are many must often result to the patient from this mode of proceeding. If the parts are beginning to coalesce and sheets of organic matter are poured out, these, it must be evident, will be ruptured, and fresh irritation excited.

But, instead, then, from its combining, with imaginable convenience, with simplicity, structure, and economy, of expense, ought to be resorted to by any one who is afflicted with a case of the



spine, or is, from other diseases, obliged to be confined to the recumbent posture for any length of time.

In a word, in the various mechanical contrivances, which have been used to support the body and head, we have very little to say. They should not be resorted to, until there is reason to believe that the osseous bone has been removed, and its place supplied by new bony matter; or that bony depositions have been thrown out in the neighbourhood of the diseased vertebra in the form of spines or rays, sufficient to support the spinal column. Their use is, therefore confined to that state of the disease, in which the patient just begins to walk, or in other words, when although a bony union has taken place, it is not sufficient to support the superincumbent weight of the body. If used before this, or in the earlier stage of the disease, they are capable of producing the effect for which they are designed, and we believe most

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if not all to be inadequate to this effect,) instead of doing good they, must do harm: for 1<sup>st</sup>. the bony union which must be extremely tender and vacillating, if any has taken place, must be destroyed by the disuniting force of the machine, and 2<sup>dly</sup>, by the irritation which will thus be created in the sinews, or the theca or membranes of the spine, inflammation increased, and the paralytic symptoms of the lower extremities consequently aggravated. Mr. Blizard thus, of them, "They are men most patient, and fortitude to bear the use of them to such a degree as to affect the parts concerned, have always found increased pain and fever, and exacerbation of all their bad symptoms, and, observes Mr. Pott, "I have known more than one instance in which the attempt has proved fatal."

The utmost degree of fortitude and of patience, on the part of the sufferer, and the most unwearied zeal and perseverance, on behalf of the pri-

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itioner, will, in all cases, be necessary, in order that these remedies may prove successful. Weeks and indeed months, sometimes pass away, without any alteration at all occurring in the symptoms, and years will, in many cases, be necessary, before a complete cure is effected.

I shall conclude this essay, by, relating the following case which is remarkable throughout for its novelty, and, notwithstanding its unfortunate termination, may be looked upon as an instance in which the efficiency of the means made use of in the treatment of this disease is strikingly exemplified.

Case. My father, John Luther, <sup>senior</sup> 45, by profession a physician, of a robust and bilious constitution, in the month of May, 1826, while being enfeebled and considerably emaciated by a chronic affection of the liver, was attacked with a dull obtuse pain in the dorsal



vertebra, and a numbness, or an uneasy tingling sensation in his legs. He did, however, suspecting the true nature of his case, but rather supposing it to be connected with, or to arise from, the liver affection, which was at this time greatly aggravated, all the remedies made use of at this conjuncture were prescribed with a view to relieve the morbid condition of that organ.

This course was pursued for some time, and as might well be imagined without experiencing any amendment in the symptoms of the disease, which was at this time existing in the spine. The increased pain in the back, the diminution of the natural temperature and animal sensibility, of the lower extremities, and the spasmodic contraction of the muscles, on the other hand clearly indicated that the morbid state of the spine, not only remained without being relieved, but continued to increase with increased force.

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He ignorant as to the precise nature of the complaint, and unable at the time to see his doctor, to account for these symptoms, little or nothing was done for it, except a blister over the heart, with occasional cupping along the spine, which gave a temporary respite from pain, and seemed to check the rapidity with which the disease would otherwise have developed itself.

The pain in his side becoming more severe, his liver evidently enlarged, tortured with spasms at night, and finding his constitution materially injured, he resolved, in the month of August, to visit the York Springs, of this State, for the purpose of benefiting his health. Accordingly, contrary to our hopes, he returned with manifest in any instance of improved health. On his arrival, however, and depending more especially, the pain in his back more severe, an inclination to stoop forward, a peculiar stiffness

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across the serobeculus cordis, with evident increase  
in his sensations of numbness and coldness in  
the lower extremities. In this situation he con-  
tinued until the month of October, riding out  
in his gig to visit his patients one day, the next  
confined to the house, as if to repair the injury  
which had been done on the day before. By  
this time, the disease bore a more confirmed as-  
pect, and the liver affection, that fruitful theme  
of former complaint, now gave way in his im-  
agination as leprosy, in its event, than the  
linking evil, which now proclaimed itself in the  
dorsal vertebrae. It was at this time that Dr. Forman  
one of his neighbouring physicians, was sent for, for  
the purpose of consulting upon his alarming case:  
nothing being, however done for the spinal dis-  
ease, except cupping along the spine, with a va-  
riety of local applications.

From the numbness and coldness of the lower

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extremities, together with the other symptoms  
just enumerated, and from his having frequent-  
ly, declared (although he was considered sane,  
and was therefore, always discredited from such  
an idea, that a spinous process was unusually  
large and protuberant, and rather painful un-  
der pressure, the Dr. was induced to examine  
the spine, and accordingly found, as his patient  
had represented, the 7<sup>th</sup> dorsal vertebra, unu-  
sually large and prominent, with some ten-  
derness under pressure. From his age & habit of  
body, being, so different from that in which a  
curvature of the spine is generally met with, & from  
his having long been the subject of a severe a-  
limentary, the first the Doctor imagined  
as were others, who saw him, to doubt the existence  
of any primary disease in the spine, conceiving it  
possible, that those symptoms, which apparently  
indicated a spinal curv. were anomalous

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of the derangement of the hepatic organs. He accordingly represented it as nothing but a natural deformity, or an exostosis; and, for a time, relieved the anxiety of his patient, by alleging, that the symptoms, which appeared to be indicative of a serious curable disease, were, in reality, arising from the derangement of the hepatic apparatus, which was now decidedly, of a serious nature. He therefore directed the following prescription, R. Hoof, Scammony, and Calomel, equal parts. M. ft Pills. Each pill containing six grains. Two to be taken morning and evening.

The Doctor was prevailed upon, at the same time, at the solicitations of his patient, rather than from a conviction, on his part, of the absolute necessity, to establish the caustic issues on each side of the projecting bone.

This course was not pursued a long time, before an alteration was discovered, not only in the

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symptoms of the hepatic derangement, but also, in the disease, which was about developing itself, in the vertebral column. The pain in his side became less severe, his faecal evacuations more regular and of a healthy colour, and his digestion in all respects better; and, as respects the disease of the spine, the want of sensibility, and the diminished temperature in the lower extremities, were now gradually restored, his carriage was more erect, and that distressing sensation of lightness & acridity of the stomach almost entirely removed.

Such was the benefit derived from the establishment of issues, which had only been of one month's duration, and which discharged little or no pus during this time. But it unfortunately happened, that at the end of this month, & soon after, the issues healed, and the symptoms now returned with redoubled violence, clearly and unequivocally proving the nature of his formidable disease.



The now, more particularly, complained of the tight-  
ness across the stomach, which he compared to a band  
drawn firmly around the body; the flatulency, be-  
came extremely disgusting; his tongue furled; urin-  
ary discharges frequent; small in quantity, and of a  
high colour; cheeks flushed; pulse tense and corded,  
and averaging about 95 in the minute; a spl. limp  
and stumble in walking; his legs drawn across each  
other while sitting; and the numbness and coldness  
gradually increased; so that the control over the  
lower limbs was limited and imperfect. He an  
effort was made to stand or walk, he would either  
fall or stumble, or his legs drag, and such, more-  
over, was the paralysis which rendered the mus-  
cular system of the inferior part of the trunk,  
that in sitting his body would fall forward, and  
it was only with the aid of crutches, or by a chair  
of peculiar construction that he was enabled to  
move to different parts of the room.

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The nature of his embarrassing case having evinced itself, by symptoms which could not well be mistaken, it was received that care and attention which its importance demanded. He was immediately placed in the horizontal position, and the caustic issues reestablished on each side of the diseased bone. The issues, however, from being improperly managed, discharged little or no pus during this time, (the beginning of December,) and the disease, in consequence, continued to get worse. Instead of being able to shift himself to different parts of the room by the remaining power which was left over the lower extremities, they now (the latter end of December) became completely paralysed, his feces and urine came away involuntarily, and he was confined exclusively to bed. More frequent removal of the caustic (the issues were at length made to discharge. The purgative system was resorted to; but owing

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to the inconvenience which attended its operation, from the want of better arrangements, it was by no means so rigidly pursued as was desired. With a view to relieve the morbid condition of the liver, his Physicians, <sup>Dr.</sup> Forman, Allen, Winters, and Bruner, at the same time introduced a seton over the convex surface of this viscus; the nitro-muriatic acid bath was prescribed with a variety of other medicinal preparations, here taken in.

This course was faithfully and perseveringly used, during the remaining part of December, and almost the whole of January, 1817, without making any sensible impression upon the symptoms of the disease. At the end of this month, and in the beginning of February, however, it was first discovered, that this course of treatment, so steadily pursued, was effecting a change in the symptoms of his complaint. Some

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ibility was restored to his extremities, their temperature was more natural, he rested well at night, his appetite was good, and his spirits light and easy. The control over the sphincter of the bladder was also regained, and the 30<sup>th</sup> of January was the first time that he complained of pain from drawing his stool.

The same course was continued through February and the greater part of March, without any further sensible improvement in the symptoms. Rather discouraged with his present situation he was now desirous of consulting himself of the advice of some more experienced physician, in addition to those already attending him. Dr. McClellan, of Philadelphia, was accordingly requested to see him, who obligingly visited him in the latter end of March.

A more vigorous course of treatment was now agreed upon. The actual cautery was ap-



plaster on each side of the diseased vertebrae, dry cup  
ping along the whole spine, sometimes above, and  
sometimes below the ischias, with ~~medicinal~~ <sup>medicinal</sup>  
cupping 2<sup>nd</sup> day. The moxa was applied every fourth  
day, alternately, on each side of the spinal col-  
umn, until they extended as far down as the last  
lumbar vertebra. Having procured Venk's ~~rel-~~  
eviator, and subsequently one of Bailey's im-  
proved bulbous, the purging could now be carried  
to its proper extent. To effect this purpose, the fol-  
lowing prescriptions were made use of, at different  
times, R Super Tarts: Potiop, R Tullkhu-tā ʒi, Gum  
'laaptzū, mix. From one to two tea spoonful of  
this was given at night, about bed time, or early  
in the morning, every other day, Or, R Mayneda,  
Licorice, and Ginger equal parts, by weight. This  
could be distended of this was given at a dose.  
A bitter root was likewise given at night, and the  
same medicine was used in large quantities.

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The plethoric state of his system was such, that it likewise became necessary to put him under absolute restrictions as regards his diet.

The diluted Nitro-muriatic acid was rubbed in the legs with a sponge once or twice a day, and stimulating frictions were used frequently.

A hammock, which was constantly placed under him, and which by being attached to the alleviator instead of the bells, was used for elevating him from the bed, likewise enabled him to obtain the benefit of gentle agitation by being used as a swing.

The treatment, as previously pursued, appeared not to be sufficiently active to effect any further favourable change in the morbid condensation of the diseased morbid matter, and of the spinal marrow and its membranes.

His time was already wearied in her struggles at restoration, and unless some more powerful

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and efficient means were resorted to, to rescue &  
repair the vessels of "the half disorganized and  
incomplete structure of the spinal column and  
its cartilages," these, incapable of sustaining their  
own vital natural actions, must finally give way,  
and disorganization and decay, or destruction,  
be the result, or else we eventually ensue.

But an embolism which was effected in  
the state of disorganization, by the plan of treatment  
which was then adopted, effected our most dan-  
gerous operations, with but a single, successful  
action, without the aid of, numerous, bleed-  
ings, discharges, or medicinal means, and not so the  
condition of his body, after some time became more  
soft and supple, and his pulse, numbering  
about 84 in the minute; the flesh of the cheeks  
gradually disappeared; and his tongue became  
moist, and in some measure, of a healthy ap-  
pearance.

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448 again, as the state of the lower extremities and rigidity of the muscles gradually subsided. In evening, after some time, to flex the foot without exciting the involuntary twitchings peculiar to this disease.

He likewise began to exercise a slight degree of voluntary motion in the right foot, being enabled to move some of the toes; but this was so inconsiderable as scarcely to be perceptible.

The rigidity grew less and less as this plan of treatment was pursued through April and May; and the voluntary power over the lower extremities likewise gradually increased, until by June he was enabled to flex and extend the feet, and also to throw into slight contractions the muscles of the thigh and leg.

June. Dr. McLellan now again visited him. The actual cautery was again applied on the right side of the excoriation, and the moxa

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every 2<sup>nd</sup> or 3<sup>rd</sup> day, this pulse being frequent, but rather feeble, skin relaxed and appetite rather indifferent, which before had been remarkably good, he was directed to take a table spoon full of the following infusion three times a day, R Rad. Colombo; Rad. Rhuizogö, & Squazvii. He was also supposed to be more generous in his diet, his legs were washed with the Ro of Spanish pepper, and frictions made use of with the flesh brush. His soups, wine and the Symplice Quinsines were taken as before.

The rigidity, which was looked upon as an evidence of the degree of inflammatory irritation existing in the spine, having wholly subsided in the right leg, and also in a great degree in the left, and being enabled to exercise a considerable degree of voluntary motion over the lower extremities, some of his physicians now consented to his setting up in a chair which was

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so constructed, that its back could be let down to any angle, and a step, which was attached to the fore part ~~part~~ of it for the purpose of resting the feet upon, was likewise so arranged that it could be heightened or lowered to any required distance, so that the chair could be converted into a perfectly horizontal plane, enabling the patient from this mode of its arrangement, to obtain the benefits of the recumbent posture and, (the chair being rockers,) of gentle motion, at one and the same time.

He was accordingly carried in a sheet from the bed in the chair, (its back being raised at an angle of about 40°) in which he remained during the greater part of the day, always replacing him whenever he felt fatigued or complained of much pain in his legs.

This temporary change from a state of long and constant confinement, and of severe

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instructed surging, agitated in religious pain,  
and a state of comparative comfort. Despondence  
and despair now gave way to compassion and  
pity; and instead of indulging in those morose  
fancies, with which he was wont to look be-  
wardly the event of his disease, he was enlivened, by  
the present flattering condition of things, with some  
degree of confidence and certainty, as to his final  
recovery. But a sad disappointment awaited him.  
After being up two weeks in the warm bed, which  
he felt no inconvenience from it excepting an ade-  
ma, and, when he continued up too long, painful  
sensations in the lower extremities, his stomach was  
observed to be considerably distended with flatulency,  
and the voluntary power in the legs appeared to  
be less than it had been before. The discharge from  
his back at this time, was not so profuse as it had  
been, and he laboured under a green colour of  
affection; which, however, he had had some time

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before he had been carried into the chair.

When these symptoms were discovered to exist, he was enjoined to remain in the recumbent posture.

They, however, continued to increase; his abdomen was not only distended, but he complained of tightness across the stomach; his respiration was affected; his bowels rather torpid; urine sparing; pulse excited, tense, and corded; considerable oedema in the lower extremities, and the voluntary power over them totally lost. So that by this time June 23<sup>rd</sup>, what he had gained by so much trial and suffering, was lost almost in a moment.

His bowels were now briskly moved with Salap and cream tart: and fresh irritation excited in the spine by the Savin ointment and slight applications of the caustic. He was also directed to be restricted to a rigid antiphlogistic regimen.

Dr. Miller, (of Lancaster,) visited him a week after his relapse. He applied the actual cautery on the

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left side of the projected vertebra, directed purging,  
every other day and the moxas every 5<sup>th</sup>.

The discharge had been kept up previously to this,  
by confining the peas in the sore, made by the cau-  
tery, on the one side of the diseased bone, and in the  
moxas on the other; and by the suppuration of  
the moxa applied on each side of the spinal column.

Soon after a copious discharge had been procured  
from the back, and brisk purging followed  
up, he got rid of that unpleasant sensation of  
tightness across the stomach, and also of its dis-  
tention & commencing. The oedema now  
over the lower extremities was also observed to  
be gradually returning.

July, 19<sup>th</sup>. The caustic is applied in the eutan-  
erized surface on the right side of the spine. The  
muscular power is considerably greater over  
the muscles of the lower limbs.

This course of treatment is continued through

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July and August with little or no variation, excepting such as is required by the access of particular symptoms.

Sept<sup>r</sup> 7. Recovered from the apople which happened him on the 28<sup>th</sup> of June. The power in his lower limbs is rather more than it was before the apople, and his general health good.

The latter end of August a small ulcer formed on the right side of the projection, which communicated with the spinous process of the projecting bone. It was supposed, at the time, to be created by the caustic running, from the issue, in which it had been applied, over the part in which the ulcer was situated. This with the pressure which the soft parts surrounding the projecting part of the spine necessarily sustained from constantly laying on them, together with the friction to which they were subjected by the motion of the protruding spinous process internally,

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was sufficient to account for the inflammation & subsequent ulceration. The inflammation locally extended to the periosteum, part of which was destroyed, and small portions of the internal compact lamella of the scapula were in consequence came away, after which it healed.

Sept. 10<sup>th</sup>. All power in the lower limbs is lost, an imperfect command over the sphincters, with a retention of urine.

Devere counter-irritation is again established on the back, brisk purging, persued and his urine drawn off with the catheter.

Sept. 12<sup>th</sup>. The command over the urine is regained.

Sept. 15<sup>th</sup>. Is able to move the toes. Sept. 20<sup>th</sup>. Exercises some degree of voluntary power over the lower extremities.

October. By the latter end of this month, he had perfectly recovered from the relapse of Sept. 10<sup>th</sup>.

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Dr. McEllan now again visited him, and was highly gratified with his situation. He was able to flex the feet and legs, with ease and facility, likewise to draw them up slightly in the bed. His general health was remarkable good at this time, and the muscles instead of being in that soft, flabby, and doughy state, in which they had been in for a long time before, had in some degree recovered their usual tone and contractile firmness.

Plans were now suggested and devised for sitting him up and for exercise in the open air, which it was determined should be put into execution forthwith; but were unfortunately frustrated by his being attacked with a severe cough.

The cough continued through November, with little or no abatement; and the country roused over the lower extremities was not at



Served to be affected in any way until the  
15th December 1887. He was utterly in-  
capable of moving his limbs. He was obli-  
ged to draw off his urine with the catheter,  
and was in short in precisely the same con-  
dition, that he had been in during his  
former relapse.

These relapses, which it appeared were  
the rewards he could obtain from the pain-  
ful and almost "barbarous" course to which  
he had subjected himself were, almost insur-  
mountably discouraging.

The treatment is pursued as before. Decem-  
ber 15th he is enabled to pass his urine. 28th he  
commenced from his relapse. - January, 1888.  
The discharge from his neck is now kept up  
by the caustic being and nursing pursued  
as before.

His urine disease is evidently is now the

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state than it had been at any period since  
his confinement. He not only has a more perfect  
control over the flexor and extensor muscles of  
the leg, but the abductor and adductors are  
beginning to resume their natural functions.  
His appetite is good, his digestion healthy, his  
bowels regular, without the aid of medicine.  
His spine at the supposed diseased part firm &  
resisting. If he is raised in the bed to a sitting  
posture, by the contrivance constructed for that  
purpose, he experiences no inconvenience, nor  
any unpleasant sensations whatever.

February. He is seized with a violent cough  
for which we can assign no reason, as was the  
case at other times, except that it arises from  
the irritation in the spine. It is light & short,  
but is soon rendered loose by medicine. His  
cough is frequent and coident, and he expectorates  
flushed; he was cupped several times without

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however deriving any sensible benefit from it.  
His cough is constant during the day and night,  
and his expectoration feeble and difficult. His  
appetite is impaired, and he has regular returns  
of fever. About ten ounces of blood were extracted  
from the arms, a tartar emetic plaster was  
applied to the chest, nitro & opium, combined was  
given in small doses, and the ioc. & ammoniac.  
mixture used as an expectorant. After having made  
use of this treatment sometime, he was attacked  
at times, mostly in the morning with a spasmodic  
contraction of the throat, which rendered his  
breathing extremely difficult and oppressive.

February 26<sup>th</sup>. To relieve him the vitriolic solution  
was given while affected with it, a vesic. applied  
to the throat and one on each side of the chest,  
and he was afterwards treated with the nitro-vitriolic  
mixture.

27<sup>th</sup> His condition now precarious, an expectorant

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secretion of mucus, without the ability to expectorate it, extremities felt cold, his voice began to flag, the use of the volatile Saltp was commenced, blunders, toddies and other stimulants given, but all to no purpose: he grew weaker and weaker until 6<sup>th</sup> clock in the evening, when he expired.

Post-Mortem Appearances. The 5<sup>th</sup>, 6<sup>th</sup> and 7<sup>th</sup> dorsal vertebrae were taken from the list of the spinal column. The 6<sup>th</sup> was then separated from the 5<sup>th</sup> and 7<sup>th</sup>. The inferior oblique processes of this bone were diseased; the cartilaginous surface, which, in a healthy state, applies to a similar surface of the superior vertebra, the next above (i.e. 7<sup>th</sup>) was much undulations: The cartilage being absorbed or removed, together with a considerable part of the bony substance of the process.

In 3

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The superior oblique was bsd of the 7<sup>th</sup> vertebra and the same appearance as the inferior, the 6<sup>th</sup>, but there was not so much destruction of substance as the process as was observed in the 0<sup>th</sup>, but the cartilage was completely removed: the inferior oblique process of the 7<sup>th</sup> on the one side was carious and the cartilage absorbed. On the other side, the cartilage was highly infected with blood.

In examining covering, and, the ligaments connecting, the superior oblique process of the 8<sup>th</sup> vertebra with the 7<sup>th</sup> had evident signs of inflammation.

In the joints formed between the oblique processes of the 5<sup>th</sup> and 6<sup>th</sup> vertebra there were slight traces of inflammation.

In the bodies of the vertebra there was no apparent departure from the healthy state. The inter-vertebral cartilaginous substance

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around the base of the transverse process, I suspect, during life, was in a state of inflammation. This colour & phenomena of the vertebrae did not extend more than  $\frac{1}{4}$  of an inch into the joint between any two vertebrae.

The rib connected with the most diseased vertebra, which was the 7<sup>th</sup>, & on the side on which this bone was most exposed, was covered at its head or articulation with the vertebra, and was irregularly enlarged at this place. Its connection with the transverse process was apparently in a state of inflammation.

The 7<sup>th</sup> dorsal vertebra had assumed its unnatural position in consequence of the destruction of its two superior oblique processes; and of the two inferior of the 6<sup>th</sup>, and probably in consequence of the diminution or absorption of the inter-vertebral substance between the anterior parts of the bodies of the 6<sup>th</sup> and 7<sup>th</sup> vertebrae.

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tibia which from the long continued inflammation that existed in this part, I infer must have taken place; but which, at the post-mortem examination, I was unable to detect from the location which this part had suffered from the cutting, of the saws.

The 7<sup>th</sup> dorsal vertebra had slipped back in consequence of this disposition of the parts, and its spinous process advanced on that of the next or the 8<sup>th</sup>. The spinous process was separated from the line of the spinal column, or in other words looked to one side; but this was very obvious when the integuments had been removed from the spinous process. This is accounted for from the destruction of the inferior oblique process of one side only of the 7<sup>th</sup> vertebra.

The pia mater and arachnoid membranes appeared natural.

The dura mater considerably thickened and

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infected.

The cellular tissue and adipose matter between the spinal marrow and bones were infected with blood.

The spinal ganglions had their neurilema infected very highly.

The spinal marrow was natural.

This having lain covered for a long time before un-  
der a severe inflammation of the liver led to an  
examination of this viscus.

It appeared perfectly healthy, exhibiting no shade  
of recent inflammation: it had however contract-  
ed strong adhesions to the diaphragm.

The coverings of the ribs and their cartilages  
on both sides were next cut through, and the ster-  
num and ribs raised up.

We were instantly struck by the unusual size  
and weight of the lungs, & by the thoracic affec-  
tion.

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The lungs were excessively engorged, the bronchial tubes nearly obliterated, and clogged with a mucous diffusion.

To put this relation that it could be pressed out of the lungs as we poured water from a well stopped sponge.

The Pleura was much thickened and semi-transparent sticking, resembling the serotie coat of the eye, both in thickness, colour and want of transparency.

The pleura parietalis adhered in almost its whole extent to the Pleura Costalis.

The pleura was obviously thicker in the neighbourhood of the spinal disease than in a more remote part. It indeed had a horn-like appearance and opacity at this part.

Extensive adhesions existed between the Pleura and lungs.

From three to four pounds of serum were confi-

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ned in the sack of the plexus, the colour could not be stated owing to its being changed by the fluid that escaped from the evacuated vessels along the spine.

The trachea and bronchia were not examined, there is no doubt but that their mucous coat was inflamed, thickened, and loaded with mucus or mucus and serum combined.

The conclusions to be drawn from the history of this case are as follows;

1<sup>st</sup>. That the caries instead of being located in the bodies of the bones, as is ordinarily the case, had affected the oblique process, which was preceded by inflammation and absorption of the cartilages.

2<sup>nd</sup>. That the degree and extent of the caries do not produce corresponding variation in the attending symptoms but that caries of the smallest extent, or any other irritation in

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the spine, capable of producing inflammation in the coverings of the Spinal marrow and the neurilema of the nerves, will constitute as bad a case of caries of the spine, so called, as regards the effects which would be produced on the general health and limbs as a more extensive caries; and it is to this, viz. the inflammatory engorgement that we are to ascribe the importance of this disease. Although, as it respects the cure of this complaint, when the degree and extent of the caries are different in different subjects, the least (every thing else being equal) will be soonest relieved and cured, while the larger and more extensive will require more time.

3<sup>rd</sup>. That the symptoms, while living, as well as the appearances after death, prove, that great amendment had been effected in the general complaints, that the progress of the caries had been arrested, and that nothing,

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in case no other disease had supervened, rendered it either impossible or improbable that a final recovery could be effected.

1<sup>st</sup>. That the affection of the spine had produced irritation and subsequently inflammation in the Pleura.

5<sup>th</sup> That his constitution being debilitated and exercise of the body, ~~being~~ precluded, this irritated and inflamed state of the mucous membrane of the lungs, instead of terminating in a moderate augmentation of mucous secretion, which, in a healthy and vigorous constitution would have been the case, terminated in the copious effusion of sero-mucous secretion, which produced suffocation and death.

Dr Gibson